

AFFIDAVIT OF FRAUD

State of _____ County of _____

I, _____, being duly sworn, deposes and says:

1. My mailing address is _____.
My telephone number at home is () _____ and cell is () _____.
2. My Visa debit card was issued by First Illinois Credit Union and the card number is :
_____ - _____ - _____ - _____.
3. The above card was requested by me. (circle one) YES NO
4. To the best of my knowledge, my card was: (check one of the following)
 - Lostapproximately on _____(month/day/year)
 - Stolen.....approximately on _____(month/day/year)
 - Never Received
 - In my possession at all times when the fraudulent transaction occurred.
5. I learned of the fraud on approximately _____(month/day/year). If lost/stolen, I reported my card as lost/stolen on _____(month/day/year).
6. The transactions listed on the following page(s) of this form were: (check the box next to each true statement)
 - Not made, nor authorized, by me.
 - To the best of my knowledge, not made by any person who I've authorized to use my card.
7. I did not receive any benefit from the transactions listed on the following page(s).
8. I (circle one) DO or DO NOT have knowledge of the identity of the person(s) illegally using my name, account number, or card. (If you have such knowledge, please provide this information in the section provided on the bottom of page two.)
9. I give consent to First Illinois Credit Union to release any information regarding my card and/or card account to any federal, state or local law enforcement agency so that the information can, if necessary, be used in the investigation and/or prosecution of any person(s) who may be responsible for fraud involving my card and/or card account.

PLEASE SIGN BELOW IN FRONT OF A NOTARY PUBLIC AND PROVIDE ADDITIONAL SIGNATURE SAMPLES ON THE NEXT PAGE

Cardholder Signature: _____

Subscribed and sworn to before me on this _____ day of _____, 20_____.

Notary public signature and seal: _____ (seal)

My commission expires: _____

List of Unauthorized Transactions (include merchant name, date cleared and dollar amount)

Please provide (5) examples of your signature below:

If you have done business with the merchant(s) listed above in the past and think this may be a billing error, please provide any information you have in the space below. This information will allow us to properly dispute the transaction(s) with the merchant.

If you have knowledge of the identity of the person who used your account number or card, please provide any information you have in the space below. If you have filed a police report, please attach a copy of the report, or provide the name of the police station, the phone number and the case number (if you were given one).
